

Substitute form 1449A/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				Application Number	To be assigned
				Filing Date	Concurrently herewith
				First Named Inventor	Ko et al.
				Group Art Unit	To be assigned
				Attorney Docket Number	5649-1293
Sheet	1	of	1		

Examiner Signature DG Date Considered 6/2005

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.